

Seeing the Whole Child

**Supporting Young People
at Risk from Suicide and
Self-Harm**

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Foreword

2	Supporting Young People at Risk from Suicide and Self-Harm
3	Every suicide is a tragedy. When a child or young person takes their own life, the impact is felt across families, friendship groups, schools, communities, and professional networks. Alongside the profound personal loss, there is an important responsibility for safeguarding partners to understand what happened, identify opportunities for learning, and strengthen practice to reduce the risk of future harm.
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6	Across Croydon and nationally, safeguarding reviews continue to demonstrate that suicide rarely results from a single event or isolated factor. Instead, it often reflects the cumulative impact of multiple adversities experienced over time. Trauma, abuse, neglect, mental ill health, exploitation, substance misuse, discrimination, family breakdown, instability, and social isolation can combine to create overwhelming emotional distress for children and young people.
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10	The Croydon Safeguarding Children Partnership has undertaken safeguarding reviews involving young people whose lives ended in suicide. These reviews highlighted not only the complexity of adolescent vulnerability, but also the dedication of professionals who worked hard to support children experiencing significant risk and adversity. They also challenged us to reflect on how agencies work together, how risk is understood, and how children experience the systems designed to protect them.
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14	This guide has been developed to support practitioners across education, health, social care, police, housing, youth justice, voluntary sector organisations, and wider community services. It brings together local learning, national evidence, and safeguarding practice principles to support professionals in recognising vulnerability, responding to risk, and working collaboratively to safeguard children and young people.
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17	Whilst no single professional or agency can prevent every suicide, safeguarding reviews consistently demonstrate that timely intervention, effective information sharing, professional curiosity, and trusted relationships can make a significant difference. Every interaction with a child or young person presents an opportunity to understand their lived experience, strengthen protective factors, and create hope.
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The purpose of this guide is not simply to raise awareness of suicide and self-harm. It is to encourage reflection, challenge assumptions, and support practitioners to think differently about the experiences of children and young people who may be struggling, often in ways that are not immediately visible.

Why This Matters

“Too often the urgent drove out the important.”

Learning from a Croydon Safeguarding Practice Review

Children and young people rarely present with a clear label that identifies them as being at risk of suicide. More often, professionals encounter fragments of a much larger story.

- **A teacher may notice declining attendance and increasing withdrawal from peers.**
- **A social worker may become concerned about instability within the family home. A youth worker may observe changes in behaviour or mood.**
- **A health professional may become aware of self-harm, anxiety, substance misuse, or repeated attendance at emergency services.**

Individually, these concerns may appear manageable. Viewed collectively, they may reveal a child experiencing significant distress and escalating vulnerability.

One of the strongest messages emerging from local and national safeguarding reviews is that children who die by suicide are often already known to multiple agencies. The challenge is rarely a complete absence of professional involvement. Rather, it is how effectively information is shared, how risk is understood across agencies, and whether practitioners are able to see the wider picture beyond individual incidents.

For many children and young people, emotional distress develops over time. Experiences such as trauma, abuse, neglect, family conflict, exploitation, bereavement, discrimination, instability, or social isolation can accumulate and affect how a child views themselves and the world around them. Without appropriate support, these experiences may contribute to feelings of hopelessness, disconnection, and despair.

Importantly, suicide is not solely a mental health issue. Whilst mental ill health can increase vulnerability, safeguarding reviews consistently highlight the importance of considering wider social, environmental, and relational factors. Children do not experience their lives in separate compartments. Their experiences at home, school, within peer groups, online, and within their communities interact to shape their wellbeing.

This means that suicide prevention is not the responsibility of specialist mental health services alone. It requires a whole-system approach in which all professionals recognise their role in identifying vulnerability, building trusted relationships, sharing information, and responding to concerns.

Children and young people repeatedly tell us that feeling listened to, understood, and connected to supportive adults makes a difference. Conversely, feeling misunderstood, judged, or invisible can increase feelings of isolation and hopelessness.

As professionals, our role is not to predict the future. Our role is to remain curious, understand context, and respond to the needs of children and young people with compassion, persistence, and partnership.



Understanding Adolescent Distress

Adolescence is a period of significant emotional, psychological, social, and neurological development. During this time, young people are developing their identity, navigating increasingly complex relationships, seeking independence, and making sense of their place in the world.

Whilst adolescence is often portrayed as a period of resilience and opportunity, it can also be a time of heightened vulnerability.

For some young people, experiences of trauma, instability, discrimination, or adversity can interrupt healthy development and affect emotional wellbeing. The impact of these experiences may not always be immediately visible. Instead, distress may emerge through behaviour, relationships, risk-taking, withdrawal, or difficulties engaging with education and support services.

A common theme across safeguarding reviews is that behaviour is often viewed separately from the experiences that sit behind it. Professionals may focus on presenting behaviours without fully exploring what those behaviours are communicating.



Some children can become withdrawn and isolated. Others may appear angry, oppositional, or disengaged. Some may stop attending school, become involved in substance misuse, take increasing risks, or experience difficulties maintaining relationships. Others may continue to function well externally whilst experiencing significant emotional distress internally.

Understanding behaviour as communication is a fundamental principle of trauma-informed safeguarding practice.

When professionals ask “What is wrong with this child?” there is a risk that behaviour becomes the focus. When professionals instead ask “What has happened to this child?” or “What might this behaviour be communicating?” opportunities for understanding and support increase.

The concept of belonging is particularly important during adolescence. Young people need opportunities to feel connected to people, places, communities, and positive identities. Safeguarding reviews consistently highlight the protective value of trusted relationships, stable support networks, positive school experiences, and opportunities for children to develop a sense of purpose and hope.

For children who experience repeated instability, disrupted relationships, exclusion, exploitation, or trauma, achieving this sense of belonging can be significantly more difficult. Supporting emotional wellbeing therefore requires more than managing risk. It requires professionals to consider how children experience safety, connection, identity, and relationships.

What Safeguarding Reviews Are Telling Us

The Croydon Safeguarding Children Partnership has undertaken reviews involving young people who experienced significant adversity and whose lives ended in suicide. Whilst each child’s story was unique, common themes emerged that continue to inform safeguarding practice today.

Complex Cases

One of the most significant findings was the complexity of the cases encountered by practitioners. Many children and families experienced multiple, overlapping vulnerabilities that required coordinated multi-agency responses.

These factors rarely occurred in isolation, creating situations where professionals were required to balance immediate safeguarding concerns with longer-term support, intervention and planning. This highlights the importance of coordinated multi-agency practice, professional curiosity and a whole-family approach to

understanding and responding to risk.

Common features included:

- Repeated missing episodes and exploitation concerns
- Emergency health presentations and safeguarding incidents
- Placement instability and disrupted care arrangements
- Mental health needs and emotional distress
- Substance misuse within the family network
- Multiple and interconnected risks occurring simultaneously

Whilst these responses were often necessary, they sometimes limited opportunities to focus on longer-term planning, relationship building, and understanding the child's lived experience.

Professionals involved in these reviews consistently demonstrated care, commitment, and concern for the young people involved. However, the complexity of the situations they were managing often meant that risks became fragmented across services.

Different agencies frequently held different pieces of information. Individual concerns were recognised, but the cumulative significance of those concerns was not always fully understood across the wider safeguarding network.

The reviews also highlighted the importance of belonging, identity, and relationships. Young people consistently expressed a desire for stability, connection, and trusted adults who understood their experiences. Family relationships, friendships, cultural identity, and aspirations for the future remained important even when circumstances were challenging.

Trauma

Another recurring theme was the impact of trauma. Childhood experiences do not simply disappear as children get older. Experiences of abuse, neglect, loss, separation, discrimination, and instability can continue to influence emotional wellbeing, relationships, and decision-making throughout adolescence.

Perhaps most importantly, the reviews reinforced the need to move beyond individual incidents and understand the broader context of a child's life. Risk rarely emerges in isolation. It develops within a wider network of experiences, relationships, environments, and systems.

The challenge for safeguarding professionals is therefore not simply to respond to what is immediately visible, but to remain curious about what may sit beneath the surface.

Reflection for Practice

Before reading further, take a moment to consider the following questions:

When was the last time you worked with a young person whose behaviour appeared challenging, but whose underlying needs became clearer over time?

How confident are you that your agency would recognise cumulative risk if different professionals each held separate pieces of information?

What opportunities exist within your role to strengthen a young person's sense of belonging, connection, and hope?

How do you ensure that the voice and lived experience of the child remain central when risk and complexity increase?

Safeguarding reviews rarely identify a single missed opportunity. More often, they reveal a series of small moments where greater curiosity, stronger collaboration, or a different conversation may have created opportunities for earlier support.

The following sections explore these themes in greater depth and consider what they mean for safeguarding practice across Croydon today.

Looking Beyond the Family Home

For many years, safeguarding practice focused primarily on risks occurring within the family home. Whilst the family remains central to a child's experience, we now understand that many of the risks affecting adolescents exist beyond parental supervision and control.

As young people become more independent, these spaces can provide opportunities for belonging, support, and positive development. However, they can also expose children to harm.

Safeguarding reviews repeatedly demonstrate that vulnerability does not stop at the front door. Children may be experiencing exploitation, bullying, coercion, abuse, discrimination, or harmful influences in places where professionals and parents have limited visibility.

For some young people, these experiences become normalised. They may not recognise themselves as being at risk or may feel unable to seek help. Others may fear the consequences of disclosure or worry that professionals will not understand their experiences.

This means safeguarding assessments must move beyond individual incidents and consider the wider environments in which children live their lives.

When professionals seek to understand a child's world, important questions emerge:

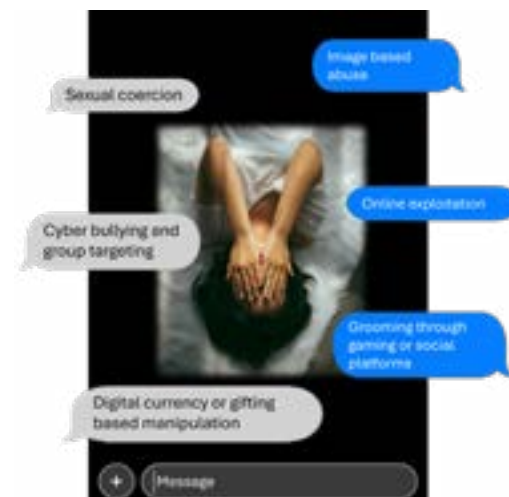
- Who are the significant people in their life?
- Where do they spend their time?
- What influences shape their identity?
- What happens when they are online?
- Where do they feel safe?
- Where do they feel they belong?
- Understanding these questions often provides a clearer picture of vulnerability than focusing solely on presenting concerns.

Children do not experience risk in isolation. Their experiences are shaped by the environments in which they live, learn, socialise and develop.

The Digital World: Opportunity and Risk

Today's young people are the first generation to grow up with constant access to digital spaces. For many children, online environments provide connection, friendship, learning opportunities, creativity, and support.

For some young people experiencing emotional distress, online communities may become one of the few places where they feel understood. However, the same spaces can expose children to significant harm.



National reviews increasingly identify concerns relating to:

- self-harm and suicide content
- cyberbullying
- online exploitation
- harmful online communities
- extremist content
- disordered eating forums
- coercive relationships
- exposure to violence and trauma

Algorithms can also reinforce vulnerability by repeatedly exposing young people to similar content. A child searching for information about self-harm may quickly be presented with increasingly harmful material that normalises distress or discourages help-seeking. Professionals do not need to be digital experts to explore online experiences.

What matters is curiosity. Simple questions can provide valuable insight:

“What apps do you enjoy using?” , “Who do you talk to online?”

“Is there anything online that worries or upsets you?”

“Have you seen content that made you feel uncomfortable or unsafe?”

Conversations about online life should become as routine as discussions about home, school, or friendships. Understanding a child's digital world is now an essential component of safeguarding practice.

Hidden Vulnerability and the Importance of Belonging

One of the strongest themes emerging from our safeguarding reviews is the importance of belonging.

Every child needs to feel connected to people, places, and communities that provide acceptance, identity, and support. For many young people, belonging is found through family, friendships, education, hobbies, culture, faith, sport, creativity, or community groups.

When these connections are disrupted, children may experience profound feelings of isolation. Young people who experience repeated instability often describe feeling as though they do not fit anywhere. Placement moves, school changes, family breakdown, exclusion, discrimination, and social isolation can all contribute to a diminished sense of belonging.

This is particularly relevant when working with adolescents. Professionals may understandably focus on risk management, appointments, assessments, referrals, and interventions. Whilst these activities are important, safeguarding reviews remind us that children often remember relationships more than processes.

A trusted adult who remains consistent, listens without judgement, and continues to show up can become a significant protective factor.

In several safeguarding reviews, young people clearly articulated what mattered most to them:

- relationships
- stability
- feeling understood
- being listened to
- maintaining important family connections
- having hope for the future

These are not peripheral issues. They sit at the heart of effective safeguarding. Professionals should therefore consider not only what risks exist in a child's life, but also what gives them strength, identity, and connection. Protective factors are often built through relationships long before a crisis occurs.

Adultification, Bias and Hidden Harm

Safeguarding professionals strive to provide fair and equitable support to all children. However, national research and safeguarding reviews continue to highlight the impact that unconscious bias and adultification can have on decision-making

Adultification occurs when children are perceived as being more mature, resilient, responsible, or capable than their age and circumstances would suggest. This can reduce empathy and lead professionals to underestimate vulnerability.

Consider the following scenario

A 16-year-old girl repeatedly goes missing from home. She is described within professional records as “streetwise”, “independent”, and “making risky lifestyle choices”.

The language used suggests control and agency.

However, when viewed through a safeguarding lens, different questions emerge.

1. What **experiences** have shaped her behaviour?
2. What risks exist within her **peer group**?
3. **Who benefits** from her absence?
4. What **support** has she received to help her feel safe?

The same behaviour can be understood very differently depending on the lens through which it is viewed.

Research suggests that Black children and children from racialised communities are particularly vulnerable to adultification. They may be perceived as older than their actual age, more resilient, less vulnerable, or more responsible for their own experiences.

The result can be reduced safeguarding intervention, diminished empathy, and missed opportunities for support.

Common Myths and Practice Realities

Misconceptions about suicide and self-harm can influence how concerns are recognised and responded to. Safeguarding reviews and research continue to challenge many commonly held assumptions, reminding us that distress is not always visible and vulnerability can often be hidden.

Whether you are new to this area of practice or looking to refresh your knowledge, the following myths and realities are designed to encourage reflection, build confidence, and strengthen safeguarding responses.

Myth: Talking about suicide will put the idea into a young person's head.

Reality:

Many practitioners worry that asking direct questions about suicide may increase risk. Research shows the opposite. Open conversations can reduce isolation, encourage disclosure, and help young people feel heard. Asking about suicide does not increase the likelihood of suicidal behaviour.

Reflect:

How confident do you feel asking a direct question about suicide?

Myth: Self-harm is attention seeking

Reality:

Self-harm is often a way of coping with overwhelming emotional distress. It may be used to manage difficult emotions, communicate distress, or regain a sense of control. All self-harming behaviour should be taken seriously and responded to with empathy and professional curiosity.

Reflect:

How does the language we use influence the way we respond to self-harm?

Myth: Children who appear resilient are coping well

Reality:

Some young people become highly skilled at masking distress. They may continue attending school, achieve academically, and appear to be coping despite experiencing significant emotional difficulties. Outward resilience does not always reflect emotional wellbeing.

Reflect:

Could this child's strengths be masking unmet needs or hidden vulnerability?

Myth: Children from stable or affluent backgrounds are less likely to be at risk.

Reality:

Suicide can affect children from any background. Young people who appear successful, well supported, or privileged may still experience significant emotional distress. Assumptions about a child's circumstances can sometimes make vulnerability harder to recognise.

Reflect:

Could assumptions about this child's background influence how I assess risk?

Myth: Suicide only young people with diagnosed mental health conditions.

Reality:

Whilst mental health difficulties can increase vulnerability, suicide is often linked to a combination of experiences including trauma, loss, exploitation, family difficulties, social isolation, and cumulative adversity. Understanding a child's wider lived experience is essential.

Reflect:

Am I focusing on a diagnosis, or am I understanding the whole child?

Myth: If a young person is serious about suicide, there is nothing we can do.

Reality:

Many young people who experience suicidal thoughts go on to recover and live fulfilling lives. Trusted relationships, timely intervention, effective support, and opportunities to build hope can all make a significant difference.

Reflect:

How can I help create hope and connection for this young person today?

Challenging assumptions about who may be at risk

Professionals should be mindful of how unconscious bias can influence the assessment of risk. A recurring theme from our reviews highlight the importance of looking beyond outward appearances and social circumstances. Emotional distress, isolation, substance misuse, disengagement, and deteriorating wellbeing can affect any young person, regardless of their background, academic ability or family circumstances.

Bias can affect all areas of safeguarding practice, including:

- risk assessment
- service provision
- language used in records
- professional expectations
- decision-making

Effective safeguarding requires ongoing reflection and challenge.

Practitioners should remain curious and responsive to changes in presentation, avoiding assumptions about risk based on socioeconomic status, family background or perceived resilience.

Professionals should routinely ask themselves:

“Would I view this behaviour differently if this child came from a different background?”

“What assumptions am I making?”

“Am I seeing the child, or am I seeing the behaviour?”

These type of questions help ensure that safeguarding responses remain child-centred, equitable, and focused on vulnerability rather than judgement.

Reflective Question

Which child or young person in your current caseload might you view differently if you looked beyond their presentation and considered their lived experience?

When Crisis Becomes the Plan

A recurring theme across local and national safeguarding reviews is the tendency for systems to become focused on managing crisis.

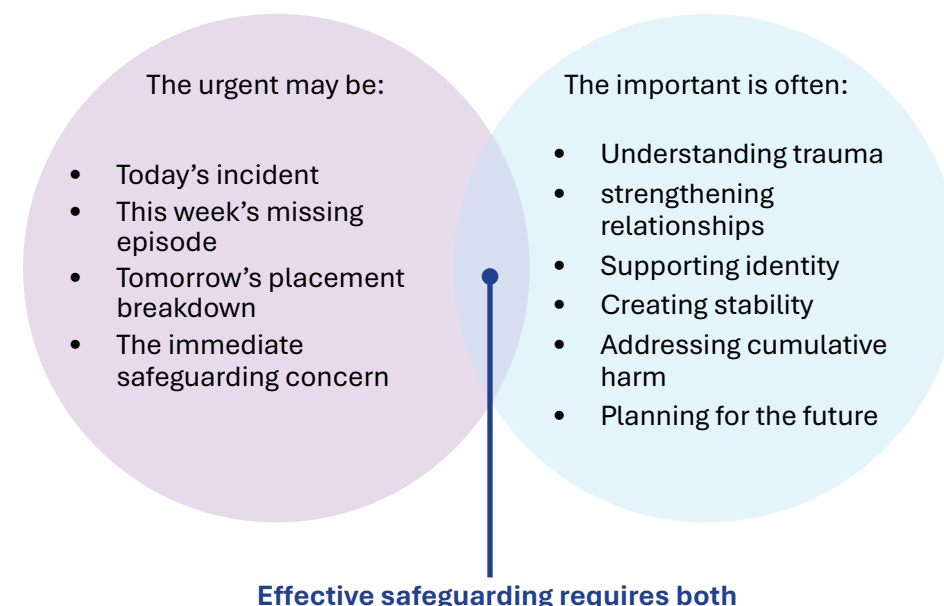
Children with complex needs often experience repeated interventions. Emergency presentations, missing episodes, placement instability, police involvement, school exclusion, self-harm, and safeguarding incidents can create a cycle of crisis management.

Professionals work hard to respond to these situations, often under significant pressure.

However, when systems become dominated by immediate concerns, there is a risk that longer-term needs receive less attention.

One review described how “the urgent drove out the important”.

This phrase captures an important safeguarding challenge.



Managing immediate risk is essential. However, long-term safety is often achieved through relational practice, coordinated planning, and understanding the child's wider lived experience.

When working with children experiencing repeated crises, professionals should ask:

“What keeps bringing us back here?”

“What needs remain unmet?”

“What would success look like for this child in twelve months rather than twelve days?”

These questions encourage a shift from reactive practice towards sustainable change.

Learning for Practice

The purpose of safeguarding reviews is not to allocate blame. Their purpose is to help us learn. Across the reviews considered within this guide, several important messages emerge.

1. **Children rarely experience difficulties in isolation.** Mental health concerns, exploitation, substance misuse, trauma, instability, family adversity, and social pressures frequently overlap and interact.
2. **Information is often available but fragmented.** Individual agencies may hold important pieces of the puzzle without anyone seeing the complete picture.
3. **Relationships matter.** Children consistently describe the value of trusted adults who listen, remain curious, and stay involved during difficult periods.
4. **Fourthly, behaviour should be understood within context.** What appears challenging, resistant, or risky may represent a child's attempt to communicate distress, gain control, seek belonging, or cope with adversity.
5. **Finally, safeguarding requires hope.** Children experiencing significant emotional distress may struggle to imagine a positive future. Professionals play a crucial role in helping young people identify strengths, build connections, access support, and recognise possibilities beyond their current circumstances.

Before moving to the next section, consider:

If this child were sitting beside me reading their case file, would they recognise themselves in the way we describe them?

The answer to that question often tells us a great deal about the quality of our safeguarding practice.

Information Sharing Saves Lives

Safeguarding reviews consistently identify information sharing as one of the most important factors in protecting children and young people. Rarely does a single agency hold the complete picture. Instead, different professionals often hold separate pieces of information that only become significant when viewed together.

A teacher may notice deteriorating attendance. A social worker may become aware of family difficulties. A health professional may identify self-harm. Police may respond to missing episodes. Youth workers may observe changes in behaviour or peer associations.

Individually, each concern may appear manageable. Collectively, they may indicate a child experiencing significant emotional distress and escalating risk. The challenge for professionals is not simply gathering information, but understanding how different experiences interact over time. Safeguarding reviews repeatedly demonstrate that risk often develops gradually. It is the accumulation of concerns, rather than any single incident, that should trigger professional curiosity and intervention.

Professionals should actively consider:

- What information do we currently hold?
- What information might other agencies hold?
- Are we seeing repeated patterns of concern?
- How are we bringing together different professional perspectives?
- Does the child's lived experience match our understanding of risk?

Information sharing is not simply an administrative requirement. It is a safeguarding intervention that can help identify vulnerability, strengthen decision-making, and reduce the likelihood of children falling between services.

The greatest risk is often not what we know, but what we have not yet connected.

Practice Point

Timely and effective information sharing remains one of the most important factors in protecting children from harm. Working Together to Safeguard Children reinforces that:

“Fears about sharing information must not be allowed to stand in the way of safeguarding and promoting the welfare of children.”

Information held by one practitioner or agency may appear insignificant in isolation, but when combined with information from others it can reveal patterns of harm, escalating risk or unmet need. Sharing information early helps practitioners develop a fuller understanding of a child’s lived experience and make better-informed decisions.

To support practice, all professionals should familiarise themselves with the following CSCP resources and consider including them within their professional safeguarding toolkit:

Croydon Multi-Agency Information Sharing Protocol
Provides practical guidance on when, why and how information can be shared lawfully and proportionately between agencies.

Information Sharing in Practice: 7-Minute Briefing
A concise summary of key principles, common barriers and practical considerations to support confident decision-making.

Together, these resources reinforce a simple but important principle: if information may help safeguard a child, practitioners should consider how it can be shared appropriately rather than focusing solely on reasons why it cannot.

Further resources:

[Croydon Multi-Agency Information Sharing Protocol](#)

[CSCP Information Sharing: 7-Minute Briefing](#)

Practice Reflection: Jake

In the years before his death, Jake had extensive contact with multiple agencies. Concerns relating to emotional wellbeing, substance misuse, education, missing episodes, police involvement, and emergency healthcare presentations were known to professionals.

Many practitioners worked hard to support him during periods of escalating vulnerability. Individual concerns were recognised and addressed by services within their respective areas of responsibility.

However, the review highlighted a broader challenge.

Whilst information existed across the system, the cumulative significance of that information was not always fully understood. Risks were recognised, but not consistently understood as part of a single, escalating picture.

Professionals described concerns about Jake’s wellbeing. Services responded to incidents as they arose. Yet there remained uncertainty about who held overall responsibility for bringing together the wider story.

The review identified the importance of creating opportunities for professionals to step back from individual incidents and ask broader questions about risk, vulnerability, and the effectiveness of existing interventions.

Reflective Questions

- If all information held by agencies was combined into a single chronology, what patterns would emerge?
- Are there children or young people currently known to multiple services where concerns may be viewed separately rather than collectively?
- Who is responsible for maintaining oversight of the overall picture?
- Are we responding to incidents or understanding vulnerability?

Learning for Practice

Children experiencing multiple adversities often require coordinated multi-agency responses that focus on patterns, relationships, and cumulative harm. Information sharing should support collective ownership of risk rather than parallel service responses.

Read the full report here: [LSCPR Jake \(2023\) | 7-Minute Briefing](#)

Professional Curiosity and Respectful Challenge

Professional curiosity sits at the heart of effective safeguarding practice. It requires practitioners to look beyond presenting behaviours, remain open to alternative explanations, and continually seek to understand a child's lived experience.

Curiosity is particularly important when working with adolescents.

Young people may not always communicate distress directly. They may minimise concerns, disengage from services, present as resistant, or appear to be coping despite experiencing significant emotional difficulties.

Similarly, professionals can become accustomed to managing high levels of risk. Over time, repeated exposure to concerns may result in risks becoming normalised. This can reduce professional sensitivity to escalating vulnerability. Safeguarding reviews frequently identify situations where professionals were working hard to support children, yet opportunities for challenge, reflection, and reassessment were limited.

Professional curiosity is not about suspicion. It is about maintaining an open and reflective mindset.

It means asking:

- **What am I missing?**
- **What might this behaviour be communicating?**
- **Have circumstances changed?**
- **Are current interventions making a difference?**
- **What would the child say about their situation?**

Professional curiosity should be supported by environments where practitioners feel able to respectfully challenge decisions, seek second opinions, and escalate concerns when risks continue to increase.

Practice Reflection: Chloe

Throughout her adolescence, Chloe experienced significant trauma, multiple placement changes, missing episodes, exploitation, substance misuse, and emotional distress.

Professionals worked hard to support her and there was clear evidence of care and commitment across agencies. However, the review highlighted how repeated crises and transitions affected her sense of identity, belonging, and stability. Perhaps most importantly, Chloe consistently communicated what mattered to her.

She spoke about family.

She spoke about friendships.

She spoke about wanting stability.

She spoke about maintaining connections with people who were important to her.

The review highlighted the importance of understanding children not simply through their risks and vulnerabilities, but through their relationships, aspirations, strengths, and lived experiences. Professionals frequently asked Chloe about her wishes and feelings. However, the review challenged agencies to consider whether those wishes and feelings consistently shaped planning and decision-making.

Reflective Questions

- How well do we understand what gives a child a sense of belonging?
- Are we focusing solely on managing risk or also strengthening protective relationships?
- What would the child identify as most important in their life?
- How are we supporting continuity during periods of change?

Learning for Practice

Children and young people who experience repeated instability often require greater relational consistency. Trusted adults, meaningful relationships, and a sense of belonging can become powerful protective factors during periods of heightened vulnerability.

Read the full report here: [LCSPR Chloe \(2021\) | 7-Minute Briefing](#)

A Case Study - Seeing the Whole Child

This case study is fictional but has been developed from recurring themes identified across the CSCP Safeguarding Practice Reviews into Chloe and Jake.

The situation

Ella is 16.

Over the past year professionals have become increasingly worried about her.

School attendance has fallen below 40%.

She has attended A&E several times following incidents of self-harm.

Police have returned her home after several missing episodes.

Her mother reports that Ella has become increasingly withdrawn, spending most of her time in her bedroom.

CAMHS are involved.

Children's Social Care are involved.

School are worried.

Substance misuse services have recently become involved.

Every agency has a slightly different picture.

No single professional feels they have the whole story.

The professionals' discussion

At the next multi-agency meeting, professionals begin reviewing recent incidents.

The discussion focuses on:

"There have been three missing episodes this month."

"She has missed another CAMHS appointment."

"Attendance is deteriorating."

"There was another A&E presentation."

"Police have attended twice."

After thirty minutes, the chair pauses.

"We've spent half an hour talking about what Ella has done. Can anyone tell me who Ella is?"

The room falls silent.

One practitioner quietly replies: "She loves horses."

Another adds: "She wanted to become a veterinary nurse."

Someone else remembers: "She always talks about her younger brother."

Another says: "She told me she feels safest when she's with her grandmother."

Suddenly the conversation changes.

Instead of discussing incidents, professionals begin discussing relationships.

Instead of focusing solely on risk, they begin considering belonging.

Instead of asking,

"How do we manage Ella?"

they begin asking,

"What has happened to Ella, and what does she need from us?"

Reflection

The reviews into Chloe and Jake found that professionals were compassionate, committed and worked hard to support them. The challenge was not a lack of care.

The challenge was that information became fragmented across agencies, responses became increasingly crisis driven, and opportunities to understand the whole child were sometimes lost among the urgency of managing immediate risks. In both reviews there were moments where practitioners knew important pieces of the story, but no one consistently held the complete picture.

What changed?

Once professionals shifted their thinking, the plan changed.

Instead of asking only,

“What risks do we need to manage?”

they also asked:

- What gives Ella hope?
- Which relationships help her feel safe?
- Who knows her best?
- What strengths can we build on?
- What has changed recently?
- Are we responding to the behaviour, or understanding the distress beneath it?
- If Ella read today’s assessment, would she recognise herself?

The meeting became less about managing services and more about understanding a young person’s lived experience.

Reflective Question

Before closing your next safeguarding meeting, ask yourselves:

If this meeting ended now, could every professional around the table describe who this young person is, not just what has happened to them?

Their Legacy

Learning from Chloe and Jake to Strengthen Safeguarding Practice

The purpose of safeguarding reviews is not to define children by how their lives ended, but to understand their experiences and improve the support offered to other children and young people. Although Chloe and Jake’s stories were different, they shared common themes.

Both experienced adversity, emotional distress, and involvement from multiple services. Their stories remind us that safeguarding is rarely about a single incident or decision. It is about how professionals, agencies, and communities work together to understand the whole child.

Their experiences reinforce the importance of seeing beyond behaviour, recognising cumulative harm, and understanding the relationships, strengths, and hopes that shape a young person’s life. They also remind us that no single professional holds the complete picture.

Effective safeguarding depends on curiosity, collaboration, and a shared commitment to listening to children and acting together.

Five Things Every Practitioner Should Remember

1. Behaviour is communication.

Look beyond behaviour to understand the experiences and needs that may sit beneath the surface.

2. Relationships reduce risk.

Consistent, trusted relationships are among the strongest protective factors for children and young people.

3. Information sharing saves lives.

No agency holds the whole picture. Safeguarding depends on collaboration and collective understanding.

4. Challenge drift and normalisation.

When risks persist or escalate, pause, reflect, and ask whether something different needs to happen.

5. Never underestimate the impact of hope.

Every interaction is an opportunity to help a child feel heard, valued, and supported.

From Concern to Action

Responding to Suicide and Self-Harm

Recognising that a child or young person may be experiencing suicidal thoughts or self-harming behaviours can feel overwhelming. Many practitioners worry about saying the wrong thing or making the situation worse. However, safeguarding reviews and research consistently demonstrate that compassionate conversations, timely action, and collaborative working can make a significant difference.

You do not need to have all the answers. Your role is to listen, remain curious, take concerns seriously, and ensure the child receives the right support.

Start with the Conversation

If a child shares thoughts of suicide or self-harm, remain calm and give them time to talk.

Listen without judgement or interruption.

Avoid minimising their feelings or rushing to offer solutions.

Be honest about your safeguarding responsibilities and explain what will happen next.

Remember, asking a child directly about suicide does not increase the risk of suicidal behaviour. Open conversations can reduce isolation and encourage children to seek support.

When you are concerned about a child, consider these three simple principles:

Ask Listen Respond

Ask

Create a safe opportunity for the child to talk.

Questions might include:

“Can you tell me more about how you’ve been feeling?”

“Have you been thinking about hurting yourself?”

“Have you had thoughts about ending your life?”

Listen

Focus on understanding the child’s experience rather than finding immediate solutions.

Children often describe wanting:

someone to listen
someone to understand
someone to take them seriously

Feeling heard can itself become an important protective factor.

Respond

- Take concerns seriously.
- Follow your organisation’s safeguarding procedures.
- Consult your safeguarding lead where appropriate.
- Share information with relevant professionals.

Where there is immediate risk, seek urgent medical or emergency support.

Working Together

Supporting children at risk of suicide and self-harm is rarely the responsibility of one professional or one service.

Depending on the child's needs, support may involve:

- family members and carers
- schools or colleges
- CAMHS
- Early Help services
- social care
- health professionals
- youth services
- voluntary and community organisations

Effective safeguarding depends on professionals sharing information, maintaining oversight of risk, and working together to build a coordinated plan around the child.

Local and National Sources of Support

Local Support Services

[Child and Adolescent Mental Health Services \(CAMHS\)](#): Provides assessment and therapeutic support for children and young people experiencing significant mental health difficulties.

[Croydon Drop In \(CDI\)](#): Provides counselling, emotional wellbeing support, and therapeutic interventions for young people.

[Family Hubs and Early Help Services](#): Provide support to children, young people, and families where additional needs are emerging.

[Off The Record Croydon](#): Offers free counselling and mental health support for children and young people.

[Mind in Croydon](#): A local mental health charity providing advocacy, counselling, wellbeing and recovery services to support people across Croydon

[Voluntary and Community Sector Organisations](#): Community organisations often provide valuable opportunities for connection, mentoring, advocacy, and early intervention.

School and College-Based Support: Schools and colleges remain important protective environments and may provide pastoral support, counselling, mental health leads, and safeguarding interventions.

National Support Services

[Samaritans](#): Available 24 hours a day for anyone experiencing emotional distress.

[Grassroots Suicide Prevention](#): a UK charity that provides training, resources, and support to help individuals and organisations prevent suicide and reduce stigma.

[Shout](#): A free confidential text service providing support to anyone in crisis.

[YoungMinds](#): Information, resources, and support for children, young people, and parents.

[NSPCC](#): Advice, guidance, and safeguarding support for children and professionals.

[Ripple Suicide Prevention Tool](#): is free browser extension that signposts people who have searched for suicide or self-harm content to mental health support and advice.

Closing Reflection

Safeguarding children and young people at risk of suicide and self-harm is complex work. There are rarely simple answers and no single intervention can remove all risk.

However, safeguarding reviews consistently demonstrate that children are better protected when professionals work together, share information effectively, maintain professional curiosity, and build meaningful relationships.

Every conversation matters.

Every relationship matters.

Every child matters.

And sometimes, the smallest interaction can make the greatest difference.